13 Cyanide Solution

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A Generator's Name and Mailing Address McDonnell Douglas Aircraft Co.	1816151110101015 911		of 1 is not required by Fet A. State Manifest Document Number 8947907 B. State Generator's ID		ent Number
19503 S. Normandie Avenue	an J				73074
4. Generator's Phone (213) 533-557/ K. L.	. Anderson 722 M/S C	6-10	1	A ₁ H ₁ Q ₁ 3 ₁ 6 e Transporter's ID	0,0,5,6,9,8
5. Transporter 1 Company Name Ward-Barker, Inc.	6. US EPA ID Number CtAtDt918t1t5t7t1	111717		sporter's Phone	(213)432-726
7. Transporter 2 Company Name	B. US EPA ID Number	1 1 1		e Transporter's ID sporter's Phone	en en
Designated Facility Name and Site Address ETICAN	10. US EPA ID Number		G. Stat	e Facility's ID I/I n G W	18196131318
2095 Newlands Dr. East		- Carara	H. Fác	lity's Phone	
Fernley, Nv. 89408 11. US DOT Description (Including Proper Shipping Name, H	N1V1D191810181915	12. Conta		13. Total Quantity	14. I. Waste No
a	· · · · · · · · · · · · · · · · · · ·	No.	Type		Wt/Vol State
WASTE CYANIDE SOLUTION, n.o.s. RQ-10(4.54)	, POLSON B, ÚNISSS,	olo Ø	TID	2016 5 0	EPA/Other
b	12.00			(P.3)	State
	4 .			1111	EPA/Other State
C					EPA/Other
d.	Se. Co	11	1		State
				1 1 1 1	EPA/Other
J. Additional Descriptions for Materials Listed Above			K. Hai		Vastes Listed Above
Cyanide 0-5% Copper 0-2% Solids 0-10%			97	1F. Hrstign	d,
E.H. Permit #4-89030101 Expir	Date: 03/01/90				
15. Special Handling Instructions and Additional Information	PPO	TLE #C	/ANIT	Æ	
Wear gloves, goggles, and respirator when handling.	HAUL				
16.	9				
GENERATOR'S CERTIFICATION: I hereby declare the and are classified, packed, marked, and labeled, and a national government regulations.	re in all respects in proper condition t	or transport I	y highw	ay according to a	opiicable international and
If I am a large quantity generator, I certify that I have a to be economically practicable and that I have selected present and future threat to human health and the envi	the practicable method of treatment	storage, or	IBROOSAI	currently available	e to me which minimizes u
generation and select the best waste management met	hod that is available to me and that I Signature _	can afford.		-	Month Day
Printed/Typed Name	A.C. 7				9531
Kris L. Anderson Agent for M.D.					s Month Day
Kris L. Anderson Agent for M.D. 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature	ΛΛ	N		A F - 1
Kris L. Anderson Agent for M.D. 17. Transporter 1 Acknowledgement of Receipt of Materials	TR Signature	M.	H	varan	10151311
Kris L. Anderson Agent for M.D. 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name SOSEPH N GAGRON	TR Signature	Μ.	<u>K</u>	haven	Month Day
Kris L. Anderson Agent for M.D. 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name SOCCIA N GAGNON 18. Transporter 2 Acknowledgement of Receipt of Materials	JR Wolfh	M.	<u>K</u>	ngvem	10531
Kris L. Anderson Agent for M.D. 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name School N. GAGNON 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name	JR Wolfh	M.	<i>K</i>	ngvem	10531
Kris L. Anderson Agent for M.D. 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name School N. GAGNON 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name	Signature Signature Signature	anifest excep	<u>J</u>	hogvem	10531
Kris L. Anderson Agent for M.D. 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name SOSCPH N GAGNON 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name 19. Discrepancy Indication Space	Signature Signature Signature	anifest excep	St. t as note	ed in Hern 19.	10531

Kris L. Anderson Agent for M.D.A.C.		957190
17. Transporter 1 Acknowledgement of Receipt of Materials	// 	
Printed/Typed Name SOSCPH N GAGNON JR	Signature M Horacon L	Month Day Year
18. Transporter 2 Acknowledgement of Receipt of Materials	$\sim 10^{-3}$	
Printed/Typed Name	Signature	Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name Signature

DHS 8022 A (1/88) EPA 8700-22 (Rev. 9-88) Previous editions are obsolete.

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Do Not Write Below This Line

Month

Day

Year